

Frankly, the record the Democrats have amassed this year so far shows us why we need to take our time. Think about it. On every major issue addressed by Congress and the White House this year, the middle class has taken a big hit. Middle-class Americans are paying for a trillion dollar "stimulus" package that no one read. They're paying for a \$400 billion omnibus appropriation bill with 9,000 earmarks in it. They're paying to bail out those who lied on their mortgage applications. They're paying for a government takeover of General Motors with no exit strategy. And they're paying for a budget that didn't include a tax cut that was promised for, yes, you guessed it, the middle class in America. And if Democrats get their way, they'll be paying for a national energy tax on anyone who has the audacity to drive a car or to flip on a light switch.

Over and over again, the people who follow the rules are being left behind by Washington. Are Democrats going to leave the middle class behind on health care as well?

The forthcoming plan from Democratic leaders will make health care more expensive, limit treatments, ration care, and put bureaucrats in charge of medical decisions rather than patients and doctors. That amounts to a government takeover of health care, and it will hurt, rather than help, middle-class families across our country.

The administration likes to say they can expand health care and lower costs at the same time, but I think that's just simply nonsense. You can't add millions of Americans to the government health care rolls and reduce costs unless government takes control of medical decisions, rations care, and limits treatments, all of which will reduce quality and undermine the care that Americans have come to expect.

Republicans believe there's a better way. Led by ROY BLUNT, the Health Care Solutions Group is crafting a plan that will ensure access to affordable, quality health care for every American, regardless of preexisting conditions. This plan will protect Americans from being forced into a new government-run plan that raises taxes, rations care, and eliminates coverage for more than 100 million Americans who receive their health care coverage from their employer. It will ensure that medical decisions are made by patients and their doctors, not by government bureaucrats. We want to let Americans who like their health care coverage keep it and give all Americans the freedom to choose the plan that best meets their needs. We want to improve Americans' lives through effective prevention, wellness, and disease management programs, while developing new treatments and cures for life-threatening diseases.

I hope Democrats here in Congress and the administration will work with us to make sure that we do this right. The American people, and particularly the middle class who have been left be-

hind, deserve our best effort to put these reforms in place that will meet their needs.

#### HEALTH CARE REFORM

The SPEAKER pro tempore. The Chair recognizes the gentleman from Kentucky (Mr. YARMUTH) for 5 minutes.

Mr. YARMUTH. Madam Speaker, the distinguished minority leader has just expressed the desire of his party to engage us in health care reform, and I'm so gratified and happy to hear him say that. Similarly, the distinguished minority leader of the Senate, who is both my Senator and my constituent, has spent the last few days in the Senate talking about that same desire, to help us move forward in addressing what we all know is an unsustainable and dysfunctional health care delivery system.

The Senator spoke last Friday, and he said, "Americans want reform that addresses the high cost of care and gives everyone access to quality care. In America in 2009, doing nothing is simply not an option. We must act and we must act decisively. The question is not whether to reform health care; the question is how best to reform health care."

None of us in either body on either side of the aisle will argue with that statement.

Unfortunately, in the remainder of the distinguished Senate minority leader's statement, there is not the first idea about how to do that. Despite his teasing us that he is going to offer solutions, they're not. In fact, what he does is pretty similar to what the distinguished minority leader of the House just did, which was to echo the themes of a talking point paper provided by Frank Luntz, the Republican message person, which basically said the Republicans cannot afford to allow Democrats to have a victory in health care. They can't allow us to get something done for the American people. And, therefore, they are going to respond by criticizing everything we are doing as a government takeover of health care. In fact, in the distinguished Senate minority leader's statement, some version of government takeover is mentioned 11 times in 1½ half pages. So we know where they're coming from.

But the arguments that are raised are also things that require scrutiny, and as we move forward in this debate, we need to examine all of them.

For instance, the Senator says, "When most companies want to raise money, they have to show they are viable and their products and services are a worthwhile investment."

Again, nobody can argue with that. That means adding value.

"Apply this model to health care, and the government would be able to create the same kind of uneven playing field that would, in all likelihood, eventually wipe out competition, thus

forcing millions of people off the private health plans they already have and which the vast majority of them very much like."

You know, when insurance companies are forced to compete, they do very well. Senator MCCONNELL and I have a common constituent, the Humana Corporation, a great corporation. When they're forced to compete, they figure out how to add value. And they're doing that right now. They are doing it with the Medicare Advantage program.

When insurance companies are forced to compete, they compete well. Right now they're not forced to compete. What many of us are proposing is that we create a public competition for them, make them compete with the public plan. And unlike what Senator MCCONNELL says, if they are unable to compete, it won't be because of an unfair advantage; it will be because they are not providing the kind of coverage at the cost that the American people want. If American people want to stay in their private plans under the proposals that we're advancing, they will be able to do that. We're not forcing anyone out. Right now most Americans don't have a choice, and we are trying to provide that choice through a public plan.

In the Senator's statement, he says: "This is how a government plan would undercut private health care plans, forcing people off the plans they like and replacing those plans with plans they like less."

They're not going to be in plans they like less. They will choose the plan they like more.

□ 1045

"That is when the worst scenario would take shape, with Americans subjected to bureaucratic hassles, hours spent on hold, waiting for a government service representative to take a call, restrictions on care and, yes, life-saving treatment and lifesaving surgeries denied or delayed."

It's a nice scare tactic. Unfortunately, what he is describing is what often happens right now in the private insurance system with doctors spending endless hours trying to argue with bureaucracies about whether certain treatments or certain procedures will be covered. So what we're trying to do is to end that and to provide competition that will end that.

Finally, the Senator says, "The American people want health care reform, but creating a government bureaucracy that denies, delays and rations health care is not the reform they want." I agree with that. I agree with that.

Then he says, "They don't want the people who brought us the Department of Motor Vehicles making life-and-death decisions for them, their children, their spouses, and their parents." Well, that's a cute line, very clever.

Unfortunately, you know, the Federal Government didn't create the Department of Motor Vehicles, but the

Federal Government did create Medicare, Medicare which now serves 40 million Americans, disabled and old, and which does a very, very good job of doing that.

So I look forward to the debate we're going to continue to have with the other side on how best to create health care reform.

#### INTRODUCING THE RAISE ACT, H.R. 2732

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. MCCLINTOCK) for 5 minutes.

Mr. MCCLINTOCK. Madam Speaker, if the gentleman from Kentucky wants to know why Republicans oppose the government takeover of our health care system, I would invite him to consult the many, many refugees from Canada and Britain who have come here to America to get their health care, because they simply can't survive with bureaucrats telling them what treatments they'll get and when they'll get them.

The Republicans are proposing to bring within the reach of every American family a basic health plan that they will own, that they can change if it fails to suit them and that they will hold wherever they work and under whatever circumstances they work; but Madam Speaker, I'm here on different business this morning.

I'm here to talk about the right of workers. Their right to gather and to bargain collectively with an employer is a fundamental right of labor. It often strengthens the position of individual workers as they negotiate with a powerful employer. Yet survey after survey tells us that union members are less satisfied with their jobs than nonunion workers, and many Americans today simply refuse to work in union shops at all.

So why is it that a bargaining process designed to improve workers' satisfaction should produce such dissatisfaction?

Perhaps the answer rests with the simple human desire in each of us to excel in what we do and to be recognized and rewarded for that excellence. Collective bargaining increases the ability of workers to take a stronger position to negotiate with an employer, and this is good, but they're then left to give up any individual rewards for outstanding work.

Union workers end up trapped with a one-size-fits-all contract that denies them the dignity that comes from individual excellence and achievement. No matter how hard that worker toils or no matter how much he produces, he gets paid exactly the same as the coal worker who puts in minimal effort.

Well, why shouldn't workers get extra pay and performance bonuses beyond the union-negotiated wage base? Why does the wage floor set through union contracts also have to be a wage ceiling for those union members who go the extra mile to get ahead?

Union leaders may see value in wiping out individual initiative to build solidarity among rank-and-file members, but those workers would be far better off if they could enjoy both the advantages of collective bargaining and the additional rewards of individual performance raises and bonuses. Many unionized businesses would gladly pay individual workers more if they could. Some have tried, but over the years, the National Labor Relations Board has repeatedly struck them down.

For that reason, I have introduced the Rewarding Achievement and Incentivizing Successful Employees, or RAISE Act, H.R. 2732. It will allow working union members to escape the false choice between collective bargaining and individual reward that our outdated labor laws have forced upon them. Senator VITTER has introduced a similar bill in the Senate.

Under the RAISE Act, union members would retain all of the collective bargaining rights under current law, and employers would be bound to the wage and benefit schedules negotiated under those laws. In addition to the floor established by the union contract, employers could add bonuses for those workers who go the extra mile, combining the benefits of collective bargaining with the rewards of individual achievement.

Years ago, Admiral Grace Hopper observed that, in all of her years in the United States Navy, she had determined that the greatest impediment to human progress is the phrase "but we've always done it this way." That's the only answer we've heard so far in opposition to this simple reform, and in days like these, that's no answer at all.

#### CONGRATULATING MRS. KIM HENRY, OKLAHOMA'S FIRST LADY

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oklahoma (Mr. BOREN) for 1 minute.

Mr. BOREN. Today, Madam Speaker, I rise to share a kind word and to send my congratulations to one of Oklahoma's great women, Kim Henry, Oklahoma's first lady and the wife of our outstanding Governor.

Born in Norman and raised in Shawnee, Mrs. Henry would mature into a confident and independent woman who would eventually find her calling as a public schoolteacher. Throughout her tenure as Oklahoma's first lady, she has been a devoted mother to three beautiful daughters, and has been an active member of numerous charities.

One of those prominent Oklahoma organizations is the influential Sarkeys Foundation. Formed in 1962 by S.J. Sarkeys, the Sarkeys Foundation has contributed over \$55 million to various Oklahoma cultural and economic initiatives. Last week, the Sarkeys Foundation asked Mrs. Henry to be its executive director. This is a significant moment in her life and also for the State of Oklahoma.

Congratulations to Oklahoma's first lady, Kim Henry. Your hard work and dedication to the State of Oklahoma doesn't go unnoticed.

#### "THE STATE OF THE UNION'S FINANCES, A CITIZEN'S GUIDE"

The SPEAKER pro tempore. The Chair recognizes the gentleman from Indiana (Mr. BURTON) for 5 minutes.

Mr. BURTON of Indiana. Madam Speaker, Members of Congress in the House and the Senate get literature sent to them every single day. In fact, we probably get four or five books a week. I don't know how many little leaflets and pamphlets we're asked to read, but we don't have time to read them all. We ask our staff to read some of them, but we don't have a chance to really get into the minutiae of some of these brochures.

Our colleagues in both the House and the Senate got this little booklet called "The State of the Union's Finances, a Citizen's Guide." These are going to be given, I guess, to people all across this country. I hope every one of my colleagues and everybody in America gets a chance to read this little booklet. Now, this was sent to us by our colleagues FRANK WOLF, Republican of Virginia, and JIM COOPER, Democrat of Tennessee. I just want to read to you a little bit about the situation that America faces, because Americans right now, I don't think, are really aware of the fiscal problems we're facing.

As of the fall of 2008, we had \$12.2 trillion in explicit liabilities. That's publicly held debt, military and civilian pensions, retiree health benefits, and others things related to that. We had \$1.3 trillion in debt for Federal insurance, loan guaranties, leases, and so forth, and we had a \$42.9 trillion debt from Medicare hospital insurance, Medicare outpatient services, Medicare prescription drugs, and Social Security. That's a total of \$56.4 trillion in debt that we have right now, today. That amounts to \$184,000 of debt for every man, woman, and child in this country; it amounts to \$435,000 of debt for a full-time worker; for each household, it amounts to \$483,000 in debt. That's the national debt today.

George Washington said we should avoid ungenerously throwing upon posterity, our kids, the burden we, ourselves, ought to bear. In 1796, they had a deficit, and George Washington said that we can't allow this to happen because we don't want to leave a burden to our kids and to our grandkids by spending too much money.

I'm telling you right now, colleagues and anybody else who is paying attention, what we're going to leave our kids and our grandkids is something that they will curse us for because they're going to have to pay extremely high taxes, and the inflationary problems that they're going to face are going to be insurmountable.